

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000165974 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DALIA ACCOUNTING SERVICE

Account Number : I20040000149

Phone : (561) 478-1777

Fax Number

: (561)478-0567

**Enter the email address for this business entity to be used for future ω annual report mailings. Enter only one email address please. **

Address:		
	Address:	Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN CARVAJAL & SONS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((E PFP20100021H)))

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Articles of Amendment to Articles of Incorporation of 15 JUL -7 AM 8: 39

CARVAJAL & SONS, INC.	
	on as currently filed with the Florida Dept, of State)
P14000081317	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the co	rporation:
ALEXANDRA RODRIGUEZ, INC.	The
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the	The new d "corporation," "company," or "incorporated" or the abbreviation ," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>x</u>)
D. If amending the registered agent and/or register new registered agent and/or the new registered	ed office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	t <mark>istered Agent:</mark> I am familiar with and accept the obligations of the position.
Sign	ature of New Registered Agent, if changing

Page 1 of 4

(((H15000165974 3)))

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>2¢</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Saily Sr	nith .	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		-	· · ·	
Add				
Remove				
4)Change		_		
Add				
Remove				
5) Change				
Add	·	_		
Remove				
6) Change		_		
Add				
Remove				

Page 2 of 4

(((E PFPZqNOOOZNH)))

	g additional Arti ets, if necessary).	(Be specific)			
					• • • •
	·				
			· · · · · · · · · · · · · · · · · · ·		
					~~~~~

<u> </u>					
					.
·				·- · · · · · · · · · · · · · · · · · ·	
·					
				tion of issued abou	
	ovides for an exci	ndment if not or	ntoined in the on	nendment itself:	<u> </u>
an amendment pro	SINGHINE INCALNC	TOTAL IL HAL CI	manico il ulo di	PARTERIAL PROPERTY	
revisions for imple	e indicate N/A)				
an amendment pro provisions for imple (if not applicable	e, indicate N/A)				
revisions for imple	e, indicate N/A)				
revisions for imple	e, indicate N/A)				
revisions for imple	e, indicate N/A)			<u> </u>	
revisions for imple	e, indicate N/A)				
an amendment pro provisions for imple (if not applicable	e, indicate N/A)				
revisions for imple	e, indicate N/A)				
revisions for imple	e, indicate N/A)				
revisions for imple	e, indicate N/A)				
revisions for imple	e, indicate N/A)				
revisions for imple	e, indicate N/A)				
rovisions for imple	e, indicate N/A)				
revisions for imple	e, indicate N/A)				

(((H150001059743))) SECRETARY OF STALL DIVISION OF CORPORATIONS

The date of each amendment(s) a	07/07/20}5		AU 0.40
date this document was signed.		· · · · · · · · · · · · · · · · · · ·	→ ir omer najii'iti
Effective date if applicable:	***		
	(no more than 90 days after a	mendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory epartment of State's records.	filing requirements, this date will i	iot be listed as th
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad by the shareholders was/were st	opted by the shareholders. The number of vo afficient for approval.	ites cast for the ameridment(s)	
	proved by the shareholders through voting greath voting group entitled to vote separate		
"The number of votes cast	for the amendment(s) was/were sufficient for	r approval	
by	(voting group)		
	(voting group)	, .	
The amendment(s) was/were ad action was not required.	opted by the board of directors without share	holder action and shareholder	
The amendment(s) was/were ad action was not required.	opted by the incorporators without sharehold	er action and shareholder	
07/07/201 Dated	* ' /		
Signature X) losself		
(By a c selecte	ifector, president or other officer - if directed, by an incorporator - if in the hands of a rated fiduciary by that fiduciary)		_
,	ALEXANDRA RODRIGUEZ		
	(Typed or printed name of person	m signing)	
	PRESIDENT		
	(Title of person sign	uing)	

Page 4 of 4